

**ALTERATION OF INFRASTRUCTURE PERMIT**  
**TOWN OF EMMITSBURG**  
**300A South Seton Avenue, Emmitsburg, MD 21727**  
**[www.emmitsburgmd.gov](http://www.emmitsburgmd.gov) · (301) 301-6300**



**Permit Instructions:**

- ☐ All applications must be completed in full along with the signature of the owner, applicant, or the owner's duly authorized representative or agent.

**Permit Fees:**

- Fee = \$35.00
- Payment may be made by cash, check, or credit card (add \$5 fee for credit card processing).
- Fees are subject to change by policy, resolution, or ordinance by the Mayor and Board of Commissioners.

**Please Note:**

- Upon granting such permit, the applicant shall schedule a pre-inspection meeting with the Town's Director of Public Works.
- The applicant shall schedule a post-inspection meeting with the Town's Director of Public Works after the work is complete.
- The applicant or the applicant's duly authorized representative or agent hereby agrees to comply with all applicable Town codes, laws, ordinances, and regulations, and in accordance with all State and Federal regulations. The applicant alone bears the responsibility of ensuring their work does not violate other laws, regulations, or the rights of neighbors and other parts. I hereby certify the information with this application to be true and correct, and I further agree to pay all costs as stated in the Town's fee schedule. The application is being made with full knowledge of the landowner and the applicant is authorized by the owner to act on his or her behalf.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

## ALTERATION OF INFRASTRUCTURE PERMIT

Property Address: \_\_\_\_\_

Tax Map / Parcel No: \_\_\_\_\_

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Owner is the same as the Applicant

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Job Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sketch:

### Town Use Only

Date \_\_\_\_\_

☐ Approved

☐ Denied \_\_\_\_\_

Fee \$ \_\_\_\_\_ ☐ Cash ☐ Check # \_\_\_\_\_ ☐ Credit Card

Pre-Inspection: ☐ Approved ☐ Denied Date: \_\_\_\_\_ Director Initials \_\_\_\_\_

Post-Inspection: ☐ Approved ☐ Denied Date: \_\_\_\_\_ Director Initials \_\_\_\_\_

Signature of Director of Public Works: \_\_\_\_\_